

16 APR -5 PM 4:16

Office Use Only

FEC
 FORM 1

STATEMENT OF ORGANIZATION

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Carter 2016

ADDRESS (number and street)

211 Greenwood Avenue

(Check if address is changed)

Suite 205

Bethel

CITY ▲

CT

STATE ▲

06801

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

bproto@optonline.net

Optional Second E-Mail Address

daniel.e.carter@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE 04 01 2016

3. FEC IDENTIFICATION NUMBER ► C

4. IS THIS STATEMENT X NEW (N) OR AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Benjamin Proto

Signature of Treasurer

Benjamin Proto

Date

04 01 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
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For further information contact:
 Federal Election Commission
 Toll Free 800-424-9530
 Local 202-694-1100

FEC FORM 1
 (Revised 06/2012)

201604050200088487

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) ☒ This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate Dan Carter

Candidate Party Affiliation REP Office Sought: House ☒ Senate ☐ President State CT District 00

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) ☐ This committee is a _____ (National, State or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

Corporation Corporation w/o Capital Stock Labor Organization

Membership Organization Trade Association Cooperative

In addition, this committee is a Lobbyist/Registrant PAC.

- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)

In addition, this committee is a Lobbyist/Registrant PAC.

In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number C
2. _____ FEC ID number C
3. _____ FEC ID number C
4. _____ FEC ID number C

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Write or Type Committee Name

Carter 2016

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name Benjamin Proto

Mailing Address 2090 Cutspring Road

Stratford CT 06614

CITY STATE ZIP CODE

Title or Position

Treasurer Telephone number 203 378 9595

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer Benjamin Proto

Mailing Address 2090 Cutspring Road

Stratford CT 06614

CITY STATE ZIP CODE

Title or Position

Treasurer Telephone number 203 378 9595

201604050200088489

Full Name of Designated Agent John Whitcomb

Mailing Address 198 Southern Blvd

Danbury CT 06810

CITY STATE ZIP CODE

Title or Position Deputy Treasurer

Telephone number 203 - 312 - 7312

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Bank of America

Mailing Address 2944 Main Street

Stratford CT 06614

CITY STATE ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY STATE ZIP CODE

201604050200088490

Spring Rd
Fed CT 06619

77578

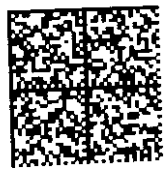
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United States Senate

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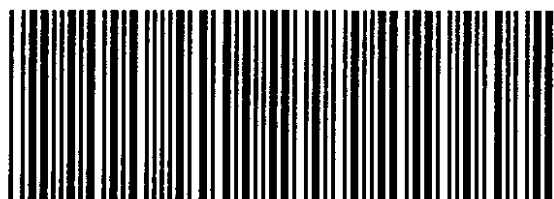
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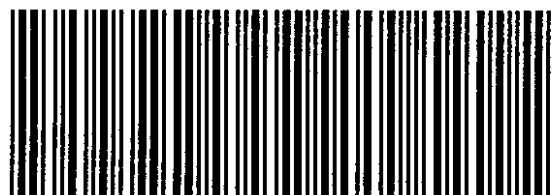
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